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(Re	equestor's Name)	<u></u>
(Ad	ddress)	
(Ac	ddress)	1
(Ci	ity/State/Zip/Phone	#)
PICK-UP	WAIT	MAIL
(B	usiness Entity Nam	e)
(D	ocument Number)	
Certified Copies	Certificates	of Status
Special Instructions to	Filing Officer:	
	JAN 3 1 2013,	
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Office Use Only



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COVER LETTER

TO:

Registration Section
Division of Corporations

First Choice Air Solutions, LLC

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Chris Mason

Name of Person

First Choice Air Solutions, LLC

Firm/Company

8201 Peters Rd # 1000

Address

Plantation FI 33324

City/State and Zip Code

comteltec1@aol.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

chris mason

Name of Person

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

\$25.00 Filing Fee

□\$30.00 Filing Fee & Certificate of Status

□\$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed)

□\$60.00 Filing Fec, Certificate of Status & Certified Copy (additional copy is enclosed)

MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

13 JAN 31 PM 2: 05

SERVICE STATE

TAIL SERVICE STATE

First Choice Air Solutions, LLC

THOUGHT OCIUTIONS			
(Name of the Limited L.) (A F	iability Company lorida Limited Lia	y as it now appears on our pability Company)	records.)
The Articles of Organization for this Limited Liab	oility Company v	were filed on <u>01/28/20</u> 4	and assigned
Florida document number L08000092751			
This amendment is submitted to amend the follow	ving:		
A. If amending name, enter the new name of the	he limited liabil	ity company here:	
,			
The new name must be distinguishable and end with "L.L.C."	the words "Limite	ed Liability Company," the d	esignation "LLC" or the abbreviation
Enter new principal offices address, if applicab	ole:	8201 Peters Rd #	1000
(Principal office address MUST BE A STREET ADDRESS)		plantation FI 33324	
12 - Direction of the commercies in Col. 1997 in Division in	71777		
		8201 Peters Rd #	1000
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		Plantation FL 33324	
		Plantation FL 333	24
			
B. If amending the registered agent and/or registered agent and/or the new registered office			rds, <u>enter the name of the new</u>
Name of New Registered Agent:	Genny Anh	nuaman	
New Registered Office Address:	8201 Peter	rs Rd #1000	
New Registered Office Address.	Enter Florida street address		
	Plantation		Florida 33324
		City	Zip Code
New Registered Agent's Signature, if changing Re	gistered Agent:		

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager MGRM = Managing Member

<u>Title</u>	Name	Address	Type of Action
MGRM	Genny Anhuaman	8201 Peters Rd # 1000	Add
		Plantation FI 33324	Remove
MGR	Sam Lolim	8201 Peters Rd #1000	Add
		Plantation FL 33324	Remove
			Add
			Remove
			Add
			Remove
			Add
			Remove
			Add
			Remove

ending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
· · · · · · · · · · · · · · · · · · ·
1/30 2019
1/30 , 2013.
Signature of a member or authorized representative of a member
Genny Anhvaman Typed or printed name of signee
Page 3 of 3

Filing Fee: \$25.00